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July 13, 2009

TO: Each Supervisor

FROM: Jonathan E. Fielding, M.D., M.P.H. *J. Fielding*  
Director and Health Officer

SUBJECT: **NOVEL INFLUENZA A H1N1 AND SEASONAL FLU PLANNING**

This is a report on the planning activities conducted by the Department of Public Health (DPH) regarding novel influenza A H1N1 (H1N1) and seasonal influenza.

DPH reports annually to the Board on its plans to provide influenza vaccinations to Los Angeles County residents for the upcoming influenza season. The emergence of H1N1 has resulted in significant changes in preparations for the upcoming flu season. This memo provides an overview of DPH activities regarding prevention and response activities for both seasonal flu and H1N1.

**Current Status of H1N1**

Clinician reports and lab testing results indicate that influenza activity in Los Angeles County is increasing. DPH expects to see an increase in influenza cases including hospitalized cases, deaths, and outbreaks during the next few months and into the fall. The dominant influenza strain in Los Angeles County continues to be H1N1. Although knowledge of H1N1 is evolving, the symptoms and severity still appear to be similar to the seasonal flu.

Since May 2, 2009, when the first case of H1N1 in Los Angeles County was identified, a total of 344 cases have been reported to DPH, of which 33 have been hospitalized (note that the number of cases reported at any given time does not account for cases that are awaiting laboratory confirmation). Hospitalizations have increased in the past several weeks as H1N1 has disseminated throughout the County. While most outpatient cases have occurred in school-aged children (ages 5-17), the majority of hospitalizations have occurred in adults ages 30-49. Almost all of the patients admitted to the intensive care units had pre-existing conditions, which would make them at higher risk for severe complications of influenza. This parallels national and State trends.

The Centers for Disease Control and Prevention (CDC) indicate that more than 1 million influenza infections have likely occurred in the United States with 33,902 lab confirmed cases, 3,065 hospitalizations, and 170 deaths. Currently, 12 states continue to experience widespread cases, with close to 6,000 cases reported in the past week. This is more than any other week since H1N1 first appeared in late April 2009.

Although some cases of seasonal flu continue to be detected through routine influenza surveillance, it is important to note that H1N1 is the dominant flu strain circulating in the United States. In addition, unlike seasonal flu, H1N1 disease transmission has thus far been sustained throughout the summer with a high number of cases continuing to be reported.

### **Planning Approach**

For the 2009-10 influenza season, DPH will focus efforts on strengthening internal capacity to support rapid implementation of H1N1 vaccine and limited seasonal flu vaccine distribution, increase surveillance, and conduct related response activities.

### **Seasonal Influenza Planning**

The 2009-10 influenza season will be more challenging than past seasons due to the complexities of having two different vaccines to administer - the trivalent (three strain) seasonal flu vaccine, and the monovalent H1N1 vaccine - which the vaccinations periods may overlap. Currently, DPH is engaged in a two-pronged approach for addressing influenza (both seasonal and H1N1) in the coming months. Consistent with previous years, DPH is devising plans for a seasonal flu outreach campaign.

In a typical flu season, DPH only administers about 6% of flu vaccinations administered throughout Los Angeles County. The majority of the flu vaccine is administered through partner community non-profit health clinics and through private providers. In order to handle the potentially high demand and large numbers of H1N1 vaccinations, the DPH plan will encourage maximum distribution of seasonal flu vaccine by these community clinics and private health care providers and implement only a very limited number of DPH-sponsored seasonal flu Points of Dispensing sites (PODs) and DPH-sponsored community outreach clinics throughout the County. This will include maintaining a small allotment of seasonal flu vaccine as a safety net to provide access for the uninsured through DPH Public Health Centers. The resource intensive outreach and flu POD activities usually associated with seasonal flu will be reserved for a component of the distribution of H1N1 vaccine.

### **Pandemic Flu (H1N1) Planning**

Planning for H1N1 will build upon DPH's existing Pandemic Flu Plan, including refinements to the plan in the areas of: influenza surveillance, laboratory diagnostics, vaccine delivery, antiviral response and distribution, community containment, and risk communications. DPH activities will be informed by lessons learned from the emergence of H1N1 in spring 2009. An after-action report is currently in preparation that will assist in enhancing the efforts going forward.

DPH is planning for a variety of scenarios associated with the pandemic that will be refined and operationalized once the CDC publishes more definitive information on vaccination distribution and direction on prioritizing population groups to receive the vaccine. DPH has established a steering committee and working groups tasked with planning more effective and efficient ways to: 1) improve flu detection; 2) prepare DPH and partner workforce to respond to the flu; 3) distribute flu vaccine to the community while emphasizing seasonal flu vaccine distribution capacity in community clinics and primary health care providers with additional outreach and delivery through DPH-managed PODs; and 4) communicate prevention, treatment and vaccine access information to public and private partners (i.e., businesses, schools, day care centers, community-based organizations, faith-based organizations, healthcare community, city leaders, jails, and agencies serving vulnerable populations). These initiatives are part of the 2009-10 Public Health Emergency Preparedness Workplan, that was submitted to the CDC on June 22, 2009.

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On June 24, 2009, President Obama signed HR 2346 authorizing \$350 million to assist state and local governments in preparing for and responding to a pandemic. CDC is preparing for the receipt of supplemental funds within the month of July 2009. It is anticipated that Los Angeles County will receive approximately \$8 million for laboratory, surveillance, and vaccine distribution.

DPH is currently developing a H1N1 vaccine distribution operational plan that will engage multiple health care providers in vaccine delivery and provide extensive outreach and communication to priority populations in the county. This plan is dependent on policy decisions that will be made by CDC during the next month.

We will keep you apprised as the plans progress. In the meantime, if you have any questions or need additional information, please let me know.

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